

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Includes Reference to Provisional and International (PCT) Applications)

Attorney's Docket No.
RL.P51329US

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PAGING IN A MOBILE TELECOMMUNICATION NETWORK

The specification of which (**check only one item below**):

☒ is attached hereto.

☐ was filed as United States Patent Application
Number _____
on _____
and was amended on _____

(if applicable).

☐ was filed as International (PCT) Application
Number _____
on _____
and was amended on _____

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §§ 119 (a)-(e) of any foreign application(s) for patent or inventor's certificate or of any International (PCT) Application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT International (PCT) Application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. §119
United Kingdom	0100659.2	10 Jan 01	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

(APPLICATION NUMBER)

(FILING DATE)

(APPLICATION NUMBER)

(FILING DATE)

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (CONT'D)
(Includes Reference to Provisional and International (PCT) Applications)Attorney's Docket
No. RL.P51329US

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or International (PCT) Application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to the patentability as defined in Title 37, Code of Federal Regulations § 1.56, which became available between the filing date of the prior application(s) and the national or international filing date of this application:

PRIOR U.S. APPLICATIONS OR INTERNATIONAL (PCT) APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. § 120:

U.S. APPLICATIONS		STATUS (check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. APPLICATION NUMBERS ASSIGNED (if any)		

I hereby appoint the following attorneys and agent(s) to prosecute said application and to transact all business in the U.S. Patent and Trademark Office connected therewith and to file, prosecute and to transact all business in connection with international applications directed to said invention:

William L. Mathis	17,337	E. Joseph Gess	28,510	Gerald F. Swiss	30,113
Robert S. Swecker	19,885	R. Danny Huntington	27,903	Michael J. Ure	33,089
Platon N. Mandros	22,124	Eric H. Weisblatt	30,505	Charles F. Wieland III	33,096
Benton S. Duffett, Jr.	22,030	James W. Peterson	26,057	Bruce T. Wieder	33,815
Norman H. Stepno	22,716	Teresa Stanek Rea	30,427	Todd R. Walters	34,040
Ronald L. Grudziecki	24,970	Robert E. Krebs	25,885	Ronni S. Jillions	31,979
Frederick G. Michaud, Jr.	26,003	William C. Rowland	30,888	Harold R. Brown III	36,341
Alan E. Kopecki	25,813	T. Gene Dillahunt	25,423	Allen R. Baum	36,086
Regis E. Slutter	26,999	Patrick C. Keane	32,858	Steven M. du Bois	35,023
Samuel C. Miller, III	27,360	Bruce J. Boggs, Jr.	32,344	Brian P. O'Shaughnessy	32,747
Robert G. Mukai	28,531	William H. Benz	25,952	Kenneth B. Leffler	36,075
George A. Hovanec, Jr.	28,223	Peter K. Skiff	31,917	Fred W. Hathaway	32,236
James A. LaBarre	28,632	Richard J. McGrath	29,195		
		Matthew L. Schneider	32,814		
		Michael G. Savage	32,596		



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and: Jed W. Caven, Reg. No. 40,551 and Stephen J. Tytran, Reg. No. 45,846

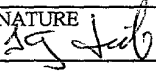
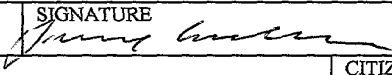
Address all correspondence to:

BURNS, DOANE, SWECKER & MATHIS, L.L.P.
P.O. Box 1404
Alexandria, Virginia 22313-1404

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Address all telephone calls to: Michael G. Savage, Reg. No. 32,596 at (919) 941-9240.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (CONT'D) (Includes Reference to Provisional and International (PCT) Applications)		Attorney's Docket No. RL.P51329US
FULL NAME OF SOLE OR FIRST INVENTOR Keijo Laiho	SIGNATURE 	DATE 12.12.2001
RESIDENCE (CITY & STATE/COUNTRY) Masala, Finland	CITIZENSHIP Finnish	
POST OFFICE ADDRESS (HOME ADDRESS) Metsätoripantie 2 G 20, 02430 Masala, Finland		
FULL NAME OF SECOND JOINT INVENTOR, IF ANY Janne Suotula	SIGNATURE 	DATE 12.12.2001
RESIDENCE (CITY & STATE/COUNTRY) Helsinki, Finland	CITIZENSHIP Finnish	
POST OFFICE ADDRESS (HOME ADDRESS) Tallberginkatu 3 as 38, FI-00180, Helsinki, Finland		
FULL NAME OF THIRD JOINT INVENTOR, IF ANY "	SIGNATURE	DATE
RESIDENCE (CITY & STATE/COUNTRY) "	CITIZENSHIP	
POST OFFICE ADDRESS (HOME ADDRESS)		
FULL NAME OF FOURTH JOINT INVENTOR, IF ANY	SIGNATURE	DATE
RESIDENCE (CITY & STATE/COUNTRY)	CITIZENSHIP	
POST OFFICE ADDRESS (HOME ADDRESS)		
FULL NAME OF FIFTH JOINT INVENTOR, IF ANY	SIGNATURE	DATE
RESIDENCE (CITY & STATE/COUNTRY)	CITIZENSHIP	
POST OFFICE ADDRESS (HOME ADDRESS)		
FULL NAME OF SIXTH JOINT INVENTOR, IF ANY	SIGNATURE	DATE
RESIDENCE (CITY & STATE/COUNTRY)	CITIZENSHIP	
POST OFFICE ADDRESS (HOME ADDRESS)		
FULL NAME OF SEVENTH JOINT INVENTOR, IF ANY	SIGNATURE	DATE
RESIDENCE (CITY & STATE/COUNTRY)	CITIZENSHIP	
POST OFFICE ADDRESS (HOME ADDRESS)		
FULL NAME OF EIGHTH JOINT INVENTOR, IF ANY	SIGNATURE	DATE
RESIDENCE (CITY & STATE/COUNTRY)	CITIZENSHIP	
POST OFFICE ADDRESS (HOME ADDRESS)		
FULL NAME OF NINTH JOINT INVENTOR, IF ANY	SIGNATURE	DATE
RESIDENCE (CITY & STATE/COUNTRY)	CITIZENSHIP	
POST OFFICE ADDRESS (HOME ADDRESS)		
FULL NAME OF TENTH JOINT INVENTOR, IF ANY	SIGNATURE	DATE
RESIDENCE (CITY & STATE/COUNTRY)	CITIZENSHIP	
POST OFFICE ADDRESS (HOME ADDRESS)		